



PRE-APPLICATION CONFERENCE REQUEST

Liberty Lake Planning & Building Services
22710 E. Country Vista Drive, Liberty Lake WA 99019
Phone: (509) 755-6707 Fax: (509) 755 6713
Website: www.libertylakewa.gov

- | | | |
|---|--------------------------------------|---|
| <input type="checkbox"/> PLAT | <input type="checkbox"/> SHORT PLAT | <input type="checkbox"/> BINDING SITE PLAN |
| <input type="checkbox"/> COMMERCIAL PERMIT | <input type="checkbox"/> VARIANCE | <input type="checkbox"/> CHANGE OF CONDITIONS |
| <input type="checkbox"/> CONDITIONAL USE PERMIT | <input type="checkbox"/> OTHER _____ | |

PROJECT: _____

APPLICANT INFORMATION

APPLICANT:

Name: _____ E-mail: _____

Mailing Address: _____ Phone: _____

City/State/Zip: _____ Fax Number: _____

Applicant Status: _____ Owner _____ Agent _____ Architect _____ Engineer _____ Contractor

PROJECT CONTACT: (if different from Applicant)

Name: _____ E-mail: _____

Mailing Address: _____ Phone: _____

City/State/Zip: _____ Fax Number: _____

ARCHITECT:

Name: _____ E-mail: _____

Mailing Address: _____ Phone: _____

City/State/Zip: _____ Fax Number: _____

ENGINEER:

Name: _____ E-mail: _____

Mailing Address: _____ Phone: _____

City/State/Zip: _____ Fax Number: _____

PROPERTY OWNER: (attach additional info sheets if there is more than one property owner)

Name: _____ E-mail: _____

Mailing Address: _____ Phone: _____

City/State/Zip: _____ Fax Number: _____

PROJECT INFORMATION

Project: _____

Project Description & Building Size: _____

Site Address / Location: _____

Parcel Number(s) of Subject Property: _____

Parcel Size(s): _____ Proposed Lot Coverage: _____

Physical Description of Site (Topography, Features, Etc.): _____

Zoning Designation: _____ Land Use Designation: _____

School District: _____ Fire District: _____

Sewer Purveyor: _____ Water Purveyor: _____

Proposed Access: _____

Environmental or Cultural Resources: ☐ YES ☐ NO

If yes, which type? _____

Within designated Shoreline Area: ☐ YES ☐ NO

Additional Comments: _____

PLEASE SUPPLY THE FOLLOWING WITH THIS REQUEST: (as applicable for project, consult PBS for more info)

- ☐ 4 copies (11x17 or larger) of the preliminary site plan
- ☐ 4 copies (11x17 or larger) of the preliminary floor plans
- ☐ 4 copies (11x17 or larger) of the preliminary elevations with materials and colors labeled
- ☐ 4 copies (11x17 or larger) of a color perspective rendering of the front elevation
- ☐ 4 copies (11x17 or larger) of the Site Analysis Map (see Commercial & Industrial Building Permits Brochure for requirements)
- ☐ PDF of Drawings Listed Above on CD-Rom or Emailed to atainio@libertylakewa.gov

Complete and return this Pre-Application Conference Request w/ Required Submittals to:

Liberty Lake Planning & Building Services - Attn: Amanda Tainio, Planning & Building Services Manager

PRE-APPLICATION CONFERENCES ARE USUALLY SCHEDULED TO BE HELD WITHIN THREE WEEKS OF RECEIVING THIS REQUEST - YOU WILL BE CONTACTED TO SCHEDULE THE MEETING DATE & TIME.

Applicant Signature: _____ Date: _____

PLANNING & BUILDING SERVICES OFFICE USE

Date Request Received: _____ Design Review Subcommittee Scheduled: _____

Pre-Application Conference Date & Time: _____